

**Pottsgrove Challenger Baseball
Player Registration Form
2019**

Player's Name_____

Address_____City_____Zip_____

Email_____Phone_____

Parent/Guardian name/s_____

(please print all information clearly)

School/Program_____

Age_____Diagnosis_____

T-Shirt Size YS YM YL AS AM AL AXL AXXL

Baseball Pant Size YS YM YL YXL AS AM AL AXL

The league will supply buddies for games .

Please return a Buddy Registration form if planning to provide own buddy.

We, the parents/guardians of the above applicant, waive all claims of injury to the applicant against Pottsgrove Little League and/or all persons connected with the same.

Signature Parent/Guardian_____

Mail in Registration deadline : March 9th

Mail all registration forms to:
PottsgroveChallenger Baseball
1037 Brookwood Drive
Pottstown, PA19464

All questions should be directed to: John Toth @ ajtothone@netzero.com
Please visit the PGLL website for Challenger and League information at:
<http://pottsgrove-little-league.siplay.com/site>

PGLL is an independent organization and not affiliated with thePottsgrove School District